Revised 06/08

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

Fax: (515)281-4073 vivw.jowa.gov/ethics



lowa Code section 8.7 requires altigifis and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the towa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

FORM-GB

Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

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DEPARTMENT OF	OFFICE	RECEIVING	THE	GIFT	OR	BEQUEST
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Einail Acciress Area Code ONOR OF GIFT OR BEQUEST: American Legion Aux. Conrad Unit #681, c/o Susan Sams, Treas. Name	Zip (if different from above)
STATE TRAINING SCHOOL Name of Department or Office 3211 EDGINGTON AVENUE ELDORA, IA 50627 Vailing Actions City, State, Zip Code 641-858-842 Area Code & Velephona No. ONTACY PERSON FOR R: CIPIETY DISPARYMENT OR OFFICE Kristin Hagedon Name 1812 Mailing Actions (if different from a above) City, State, Engedo @the.state.laus Email Acciness Area Code ONOR OF GIFT OR BEQUEST:	Zip (if different from above)
Name of Department or Office 3211 EDGINGTON AVENUB Natifing Address 641-858-3622 Aloa Code & Telephona No. ONTACT PEIFSON FOR R: ECIPIENT DISPARTMENT OR OFFICE Kristin Hagedon Name 1112 Malling Address (if different from above) Kragedo @thestatela us Email Address ONOR OF GIFT OR BEQUEST: American Legion Aux. Contrad Unit #681, c/o Susan Sams, Treas.	Zip (if different from above)
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Restin Hagedon Name State Mailing Address (if different from above) Engelo @libestate laus Ennail Address Area Code ONOR OF GIFT OR BEQUEST: American Legion Aux. Conrad Unit #681, c/o Susan Sams, Treas.	· ·
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PO Box 217 Whitten, 7A 50269 Malling Address City, State, Zip Code 9/26/17	\$50.00
Willing Address City, State. Zip Cose 97.20/17	
Area Code & Telephone Number	•
receiving de	fined as "fair market value" of item as determined by partment or office. If no value mark "0,00".
Ernall Address (cytional)	
Provide a description of the gift or beguest and purpose thereof:	
monetary donation to be used for religious activities or Christmas it	ens for students
monetary deliation to be used for rengious activities of Christinas is	ons for stagonts
Chlora to use this farm	
Criteria to use this form:	1. O
Receipt of any gift or bequest that is received by any department of the state or received by	ne Governor on benait of the state.

Kristin Hagedon affirm that the gift or bequest reported above is accurate. I further affirm that the information conterming the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Signature Thegedon